

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy ability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. **Any false reporting may be referred to the Police for investigation.**
6. This report will be forwarded by the insurers of the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore(GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

ACCIDENT STATEMENT

Date Of Report	26/04/2017 15:21
Date Of Accident	24/04/2017 18:45
Exact Location Of Accident	CANTONMENT ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKT8976X
Insured/Policyholder	
Name Of Registered Owner	TAN HIAP KWEE
NRIC No	S7497143A
Email Address	LIFEW1DE@YAHOO.COM
Mobile Phone No	(LOCAL) +65-96953680
Alternative Phone No	OTHERS-96953680

Vehicle Particulars

Manufacturer	SUBARU
Model	XV-1.6 I-S AWD CVT (A)
Exact Purpose for which vehicle was being used at time of accident	
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	2100419385-01000
Cover Note Number	

Driver

Name of Driver	TAN HIAP KWEE
NRIC No	S7497143A
Date Of Birth	07/01/1974
Occupation	INDOOR
Date Of Driving Pass	27/07/1995
Driving Experience	21 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96953680
Fax Number	
Contact Number	OTHERS-96953680
EMail Address	LIFEW1DE@YAHOO.COM

Address	BLK 6 HILLVIEW RISE #11-29
Postcode	667980
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
Vehicle Registration Number of Driver's Own Vehicle	- - -
Insurance Company of Driver's Own Vehicle	- - -

General Information of the Accident

Type Of Accident	COLLISION- HEAD TO REAR (TP HIT INSURED)
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Was any body injured in the Accident?	NO
Was any other material or property damaged?	NO
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	4

Details of Police Action

Was the accident reported to the police?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO SKETCH PLAN

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Was there any audio recorded?	NO

Singapore Accident Statement

Accident Date & Time: 24/4/17 1900hrs 1845 hrs	
Accident Location: Cantonment Road	
Vehicle Number: SKT8976X	Make/Model: SUZUKI XL
Policyholder Name: TAN HIAP KWEE	
NRIC: S7497143A	Mobile: 96953680
Email: ppkws1de@yahoo.com	
Insurance Company: AIG	
Policy Number: 2100419385-01000	Cover Note:
Policy Coverage: Comprehensive(✓) Third Party() Third Party Fire & Theft()	
State Action Taken: Claim Own Policy() Claim Third Party(✓) Reporting Only()	
Driver Name: TAN HIAP KWEE	
NRIC: S7497143A	Mobile: 96953680
Date Of Birth: 7/1/74	Driving Pass Date: 27/7/95
Gender: Male(✓) Female()	Occupation: Indoor(✓) Outdoor()
Address: 6 Hillview Rise, #11-29 S(667480)	
Is driver an employee of the Insured's Company: Yes() No(✓)	
If No, Relationship of the Driver with the Insured: Owner(✓) Spouse() Friend() Relative() Children() Sibling()	
Weather Conditions: Clear(✓) Raining() Others()	
Road Surface: Dry(✓) Wet() Others()	
Was any foreign vehicle involved in this accident? Yes() No(✓)	
Was any body injured in the Accident? Yes() No(✓)	
Was there any video captured by Car Camera? Yes(✓) No()	
Number of Passengers (Including Driver): 4	
Was the accident reported to the police? Yes() No(✓) Attach Police Report, if any	
3 rd Party Name: Mani Poovarasa	
Vehicle Number: FBJ6909M	Make & Model:
NRIC: S 88752095	Mobile: 90090441
Witness Details (if any):	
Other Details (if any): Refer to Sketch Plan	

Sketch Plan Pg. 2

SKETCH PLAN

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8. **Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that :

(a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of :

(i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;

(ii) investigating the accident and/or my claims;

(iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;

(iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or

(v) complying with applicable law in administering, processing, handling and/or dealing with my claims. (collectively the "Purposes")

(b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and

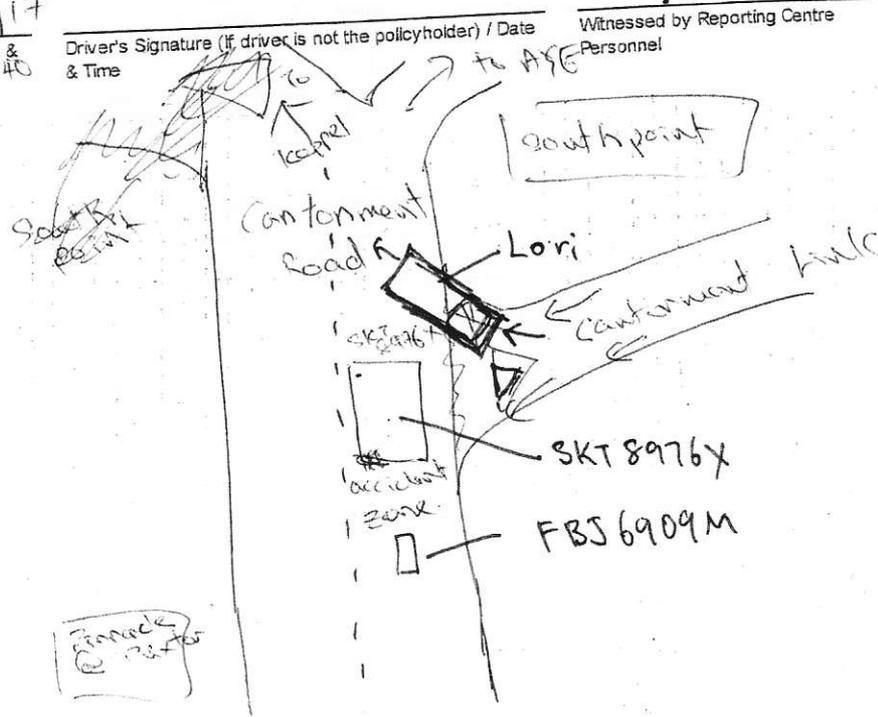
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time
26/4/17
1940

Driver's Signature (if driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel
Dank

Sketch Plan



Sketch Plan Pg. 3

Describe Circumstances of the Accident

Stop my car at Captainment Road, when to lorry
turning coming out of minor road.
Suddenly, motorist / man; ~~PCW~~ ~~lorry~~ ~~crash~~
into my rear at around 15:00 hrs ^{15:20 hrs} 24th
April 2017.
AT

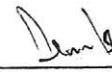
3rd party as of first wanted to settle privately
so not report was made within 24 hours
last minute, 3rd party wanted to claim ~~ISFE~~
insurance. Thus report was only made
today 26/4/17.

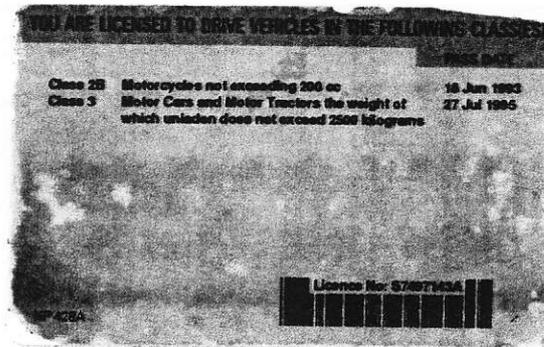
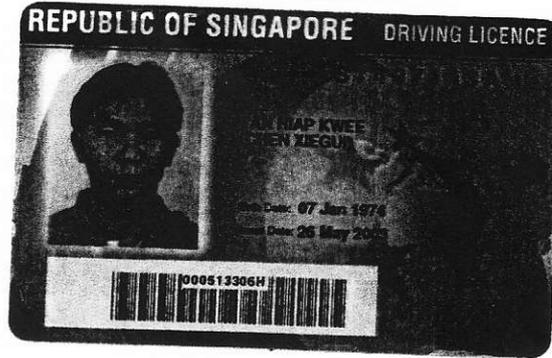
Declaration

We declare the foregoing particulars are true in every respect.

 26/4/17
Policyholder's Signature / Date &
Time 14:00

 Driver's Signature (if driver is not the policyholder) / Date
& Time


Witnessed by Reporting Centre
Personnel



Sketch Plan Pg. 5

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S7497143A



Name
TAN HIAP KWEE
(CHEN XIEGUI)
陈 协 桂

Race
CHINESE

Date of birth 07-01-1974 Sex M

Country of birth MALAYSIA



S7497143A

3455042



NRIC No. S7497143A



Date of issue
08-01-2004

BLK 8 HILLVIEW RISE #11-29
SINGAPORE 667980

NRIC No: S7497143A Date: 18/08/2018



HOTLINE TEL: (65) 6419-3000
FAX: (65) 6415-3723

CERTIFICATE OF INSURANCE

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)
MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1960
ROAD TRANSPORT ACT, 1987 (MALAYSIA)
MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

M.X.1

SUBARU AUTO PROTECTOR	(The below excess is subject to GST)
CERTIFICATE NO. 2100419385-01000	OWN DAMAGE EXCESS S\$800.00 (1) WINDSCREEN EXCESS S\$100.00 <small>(for policies with effect from 1st November 2002)</small>
	SUM INSURED Market Value
	INSURING WITH COE/PARF Yes
1) VEHICLE REGISTRATION NO.	SKT8976X
2) NAME OF INSURED	TAN HIAP KWEE (CHEN XIEGUI)
3) EFFECTIVE DATE OF THE COMMENCEMENT OF INSURANCE FOR THE PURPOSES OF THE ACT	25 Jun 2016
4) DATE OF EXPIRY OF INSURANCE	24 Jun 2017
5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE*	
SUBJECT TO AGE CONDITION : All Age Condition	
a) The Insured.	
b) Any other person who is driving on the Insured's order or with his permission.	
This policy will indemnify the insured or any authorised driver only if he/she meets the age conditions.	
A Young and/or Inexperienced Driver Excess ("YIDR") of S\$3,000.00, in addition to the Policy Excess, applies to You and any Authorised Driver (named or unnamed) if You are or the said Authorised Driver is below the age of 23 and/or has less than 2 years' driving experience.	
Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.	
6) LIMITATION AS TO USE*	
Use only for social, domestic and pleasure purposes and for the Insured's business.	
The Policy does not cover use for hire or rewards, tuition, driving test, racing, pace-making, reliability trial, speed-testing the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with the Motor Trade.	
APPROVED REPORTING CENTRES / SUBARU AUTHORISED REPAIRERS	
1. Motor Image Enterprises Pte Ltd - 19 Lor 8 Toa Payoh (Tel: 6417 0100)	
APPROVED REPORTING CENTRES / AIG AUTHORISED REPAIRERS (FOR CLAIMS-RELATED REPAIRS)	
2. ComlorDelgro Engrg - 205 Braddell Rd (Tel: 63837118) 3. DPS Body & Paint Workshop - 209 Pandan Gardens (Tel: 65684501)	
4. Ethoz - 30 Bukit Batok Cres(Tel:66547777) 5. Glass-Fix - 52 Ubi Ave 3 (Tel: 62780887) - For windscreen only	
6. Kan Fook Sing Motor - 61 Defu Lane 12 (Tel: 67479560) 7. Lai Huat (Meng Kee) Motor - 21 Sin Ming Ind (Tel: 64538110)	
8. Mova Automotive - 1008 Bukit Merah Lane 3 (Tel: 62723892) 9. Progressive Automotive - 3022A Ubi Rd 1 (Tel: 67415336)	
10. SME Motor - 1 Kaki Bukit Ave 6 Blk D (Tel: 67476106)	
LOSS OF USE	Loss of Use 10 Days (1500 - 1600cc) - Refer to policy wordings for details
* NAMED DRIVER	NA
HIRE PURCHASE COMPANY / EMPLOYER'S LOAN	DBS BANK LTD
<i>*Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.</i>	

!! We hereby Certify that the policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

Issued in Singapore 2 Jun 2016

AIG Asia Pacific Insurance Pte. Ltd.

500619-010
TAN CHONG CREDIT - SUBARU PA
911 BUKIT TIMAH ROAD
SINGAPORE 589622
ANSP-MOTOR

AUTHORISED REPRESENTATIVE

ORIGINAL

TCCKHC.